

PATENT APPLICATION SERIAL NO. \_\_\_\_\_

U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE  
FEE RECORD SHEET

02/18/2004 WASFAW1 00000021 10776405

01 FC:2001 385.00 OP  
02 FC:2201 86.00 OP  
03 FC:2202 9.00 OP

\_\_\_\_\_ →

05/17/2004 HMDHAMM1 00000014 012000 10776405

01 FC:2202 9.00 DA  
02 FC:2203 145.00 DA

PTO-1556  
(5/87)

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2003

Application or Docket Number

*10776405*

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

|                                  |                     |                                     |
|----------------------------------|---------------------|-------------------------------------|
| TOTAL CLAIMS                     | <i>21</i>           |                                     |
| FOR                              | NUMBER FILED        | NUMBER EXTRA                        |
| TOTAL CHARGEABLE CLAIMS          | <i>22</i> minus 20= | * <i>2</i>                          |
| INDEPENDENT CLAIMS               | <i>5</i> minus 3 =  | * <i>2</i>                          |
| MULTIPLE DEPENDENT CLAIM PRESENT |                     | <input checked="" type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
|--|----------------------------------|-------|------------------------------------|--------------------------|
|  | Total                            | Minus |                                    |                          |
| Independent                                    | *                                | Minus | **                                 | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    | <input type="checkbox"/> |

SMALL ENTITY  
TYPE

| RATE      | FEES       | RATE         | FEES   |
|-----------|------------|--------------|--------|
| BASIC FEE | 385.00     | OR BASIC FEE | 770.00 |
| X\$ 9=    | <i>18</i>  | OR X\$18=    |        |
| X43=      | <i>86</i>  | OR X86=      |        |
| +145=     | <i>145</i> | OR +290=     |        |
| TOTAL     | <i>634</i> | OR TOTAL     |        |

OTHER THAN  
SMALL ENTITY OR  
SMALL ENTITY

| RATE             | ADDITIONAL FEE | RATE             | ADDITIONAL FEE |
|------------------|----------------|------------------|----------------|
| X\$ 9=           |                | X\$18=           |                |
| X43=             |                | X86=             |                |
| +145=            |                | +290=            |                |
| TOTAL ADDIT. FEE |                | TOTAL ADDIT. FEE |                |

| AMENDMENT B                                    | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
|--|----------------------------------|-------|------------------------------------|--------------------------|
|  | Total                            | Minus |                                    |                          |
| Independent                                    | *                                | Minus | **                                 | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    | <input type="checkbox"/> |

| RATE             | ADDITIONAL FEE | RATE             | ADDITIONAL FEE |
|------------------|----------------|------------------|----------------|
| X\$ 9=           |                | X\$18=           |                |
| X43=             |                | X86=             |                |
| +145=            |                | +290=            |                |
| TOTAL ADDIT. FEE |                | TOTAL ADDIT. FEE |                |

| AMENDMENT C                                    | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
|--|----------------------------------|-------|------------------------------------|--------------------------|
|  | Total                            | Minus |                                    |                          |
| Independent                                    | *                                | Minus | **                                 | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    | <input type="checkbox"/> |

| RATE             | ADDITIONAL FEE | RATE             | ADDITIONAL FEE |
|------------------|----------------|------------------|----------------|
| X\$ 9=           |                | X\$18=           |                |
| X43=             |                | X86=             |                |
| +145=            |                | +290=            |                |
| TOTAL ADDIT. FEE |                | TOTAL ADDIT. FEE |                |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.